

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## REISSUE PATENT APPLICATION TRANSMITTAL

PTO

08306 US  
10/62/532

|  |  |               |
|--|--|---------------|
| Address to:<br><br>Mail Stop Reissue<br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, VA 22313-1450 | Attorney Docket No.                            | BJT 341RI     |
|  | First Named Inventor                           | Sergio Landau |
|  | Original Patent Number                         | 6,264,629     |
|  | Original Patent Issue Date<br>(Month/Day/Year) | July 24, 2001 |
|  | Express Mail Label No.                         | EV325399750US |

## APPLICATION FOR REISSUE OF:

(Check applicable box)



Utility Patent



Design Patent



Plant Patent

## APPLICATION ELEMENTS (37 CFR 1.173)

- Fee Transmittal Form (PTO/SB/56)  
(Submit an original, and a duplicate for fee processing)
- Applicant claims small entity status. See 37 CFR 1.27.
- Specification and Claims in double column copy of patent format  
(amended, if appropriate) \*\*copy of patent
- Drawing(s) (proposed amendments, if appropriate) \*\*copy of patent
- Reissue Oath/Declaration (original or copy)  
(37 C.F.R. 1.175)
- Power of Attorney
- Original U.S. Patent currently assigned?  Yes  No  
(If Yes, check applicable box(es))
  - Written Consent of all Assignees
  - 37 C.F.R. 3.73(b) Statement
- CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table
- Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all of the following are necessary)
  - Computer Readable Form (CFR)
  - Specification Sequence Listing on:
    - i  CD-ROM (2 copies) or CD-R (2 copies); or
    - ii  paper
  - Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

- Statement of status and support for all changes to the claims. See 37 CFR 1.173(c).
- Original Patent Grant
  - Ribboned Original Patent Grant
  - Statement of Loss (PTO/SB/55)
- Foreign Priority Claim (35 U.S.C. 119) (if applicable)
  - Information Disclosure Statement (IDS)/PTO-1449
  - Copies of IDS Citations
- English Translation of Reissue Oath/Declaration (if applicable)
- Preliminary Amendment
- Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)

17. Other: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## 18. CORRESPONDENCE ADDRESS

 Customer Number. 23581 OR  Correspondence address below

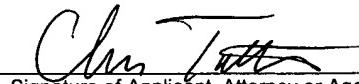
|         |  |           |                |                |
|---------|--|-----------|----------------|----------------|
| Name    | Christopher S. Tuttle, Esq.                                  |           |                |                |
| Address | Kolisch Hartwell, P.C.<br>520 S.W. Yamhill Street, Suite 200 |           |                |                |
| City    | Portland   | State     | Oregon         | Zip Code       |
| Country | United States  | Telephone | (503) 224-6655 | Fax            |
|         |  |           |                | 97204          |
|         |  |           |                | (503) 295-6679 |

|                   |                             |                                   |               |
|-------------------|-----------------------------|-----------------------------------|---------------|
| Name (Print/Type) | Christopher S. Tuttle, Esq. | Registration No. (Attorney/Agent) | 41,357        |
| Signature         |                             | Date                              | July 24, 2003 |

This collection of information is required by 37 CFR 1.173. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| <b>REISSUE APPLICATION FEE TRANSMITTAL FORM</b>  |                                      |                                     |  |   |              |                           | Docket Number (Optional)<br><b>BJT 341RI</b> |          |
|--|--------------------------------------|-------------------------------------|--|---|--------------|---------------------------|--|----------|
| <b>Claims as Filed – Part 1</b>  |                                      |                                     |  |   |              |                           |  |          |
| Claims in Patent   |                                      | Number Filed in Reissue Application | (3) Number Extra                       | Small Entity  |              | Other than a Small Entity |  |          |
|  |                                      |                                     |  | Rate  | Fee          |                           | Rate   | Fee      |
| (A) 20   | Total Claims (37 CFR 1.16(j))        | (B) 37                              | **** 17 =                              | x \$ 9 =  | 153.00       | or                        | x \$ _____ =                                 | --       |
| (C) 07   | Independent claims (37 CFR 1.16(i))  | (D) 11                              | * 04 =                                 | x \$ 42 =   | 168.00       |                           | x \$ _____ =                                 | --       |
|  |                                      |                                     |  | Basic Fee (37 CFR 1.16(h))  | \$375.00     |                           |  | \$ _____ |
|  |                                      |                                     |  | Total Filing Fee  | \$696.00     |                           | OR   | \$ _____ |
| <b>Claims as Amended – Part 2</b>  |                                      |                                     |  |   |              |                           |  |          |
|  | (1) Claims Remaining After Amendment |                                     | (2) Highest Number Previously Paid For | (3) Extra Claims Present  | Small Entity |                           | Other than a Small Entity                    |          |
|  |                                      |                                     |  |   | Rate         | Fee                       |  | Rate     |
| Total Claims (37 CFR 1.16(j))  | ***                                  | MINUS                               | **                                     | * =   | X \$ _____ = |                           | x \$ _____ =                                 |          |
| Independent Claims (37 CFR 1.16(i))  | ***                                  | MINUS                               | *****                                  | =   | x \$ _____ = |                           | x \$ _____ =                                 |          |
|  |                                      |                                     |  | Total Additional Fee  | \$           |                           | OR   | \$       |
| <p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B – A); if "A" is 20 or less, use (B – 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____.<br/>A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>11-1540</u>.<br/>A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>696.00</u> to cover the filing/additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> |                                      |                                     |  |   |              |                           |  |          |
| <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>  |                                      |                                     |  |   |              |                           |  |          |
| July 24, 2003  |                                      |                                     |  | <br>Signature of Applicant, Attorney or Agent of Record |              |                           |  |          |
| Date   |                                      |                                     |  | Christopher S. Tuttle, Esq.   |              |                           |  |          |
| 41,357   |                                      |                                     |  | Typed or printed name   |              |                           |  |          |
| Registration Number, if applicable   |                                      |                                     |  |   |              |                           |  |          |

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Reissue Patent Application of

SERGIO LANDAU

Patent No. : 6,264,629

Issued : July 24, 2001

For : SINGLE-USE NEEDLE-LESS HYPODERMIC  
JET INJECTION APPARATUS AND METHOD

Mail Stop REISSUE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Sir:

**SUBMISSION OF OWNERSHIP INTEREST AND**  
**CONSENT TO REISSUE APPLICATION**

I, Mike Temple, am the Executive Vice President and General Manager of Bioject Inc., and am authorized to act on its behalf. I have reviewed the chain of title for U.S. Patent No. 6,264,629 and have determined that Bioject Inc. is the assignee of the entire ownership interest in the patent. Pursuant to 37 C.F.R. § 3.73(b), Bioject Inc.'s interest is established by the enclosed documentation.

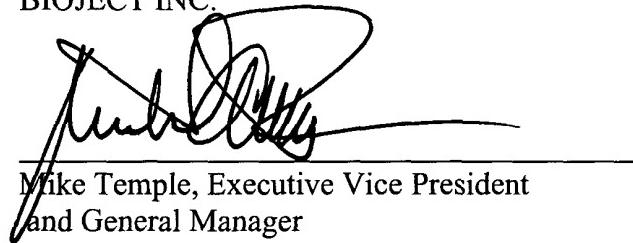
Bioject Inc. hereby consents to the above identified reissue application concerning U.S. Patent No. 6,264,629.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements

and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

BIOJECT INC.

Date: 7-21-03



A handwritten signature in black ink, appearing to read "Mike Temple", is written over a horizontal line. Above the signature, the company name "BIOJECT INC." is printed in a standard font. Below the signature, the title "Mike Temple, Executive Vice President and General Manager" is printed in a smaller font.